



FEB 14-06 11:28AM FROM AKERMAN SENTERFITT

5616596313

T-840 P.01/04 F-981

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### FAX COVER SHEET

From: Pablo Meles

Date: February 14, 2006

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PLEASE DELIVER 4 PAGE(S) (including cover sheet) TO:

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### Comments/Special Instructions

### METHOD AND APPARATUS FOR CONTENT BLOCKING - 10/039,324

Please find attached formal papers relating to the Issue Fee in connection with the above-referenced patent application. Please charge issue fee of \$1000.00 and any additional fee(s) or underpayments of fee(s) to deposit account number 50-0951 - AKERMAN SENTERFITT.

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(WP285721,1)



11:28AM FROM-AKERMAN SENTERFITT

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T-840 P.03/04 F-881

PTO/SB/17 (01-06)

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## FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	1000.00
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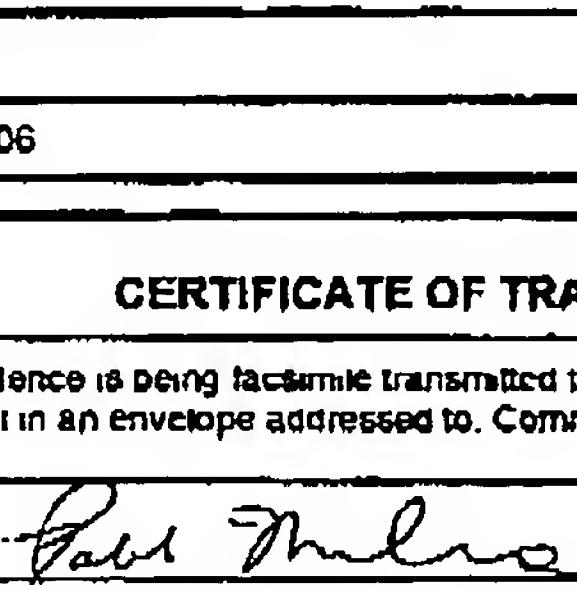
(To be used for all correspondence after initial filing)

		Application Number	10/039,324
		Filing Date	12/31/2001
		First Named Inventor	Rindberg
		Art Unit	2883
		Examiner Name	Le, Danh C
Total Number of Pages in This Submission	3	Attorney Docket Number	7042-10

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)  <b>PTOL-85</b>
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	AKERMAN SENTERFITT		
Signature			
Printed name	Pablo Meles		
Date	February 14, 2006	Reg. No	33,739

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